

<b>Process Name:</b> Benefit/Insurance Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Eligibility and Enrollment	<b>Sub-Process Identifier:</b> BA-01
<b>Sub-Process Purpose and Objectives:</b> The Eligibility and Enrollment sub-process will establish and maintain eligibility for “Central State Employees” and “Participants” utilizing an ERP Benefits/Insurance module. “Central State Employees” are defined as employees that are currently maintained within the State Employee Information System (SEIS) database. “Participants” are defined as employees of the University of Tennessee (UT), Tennessee Board of Regents (TBR), Local Education (LE), Local Government (LG) and eligible former affiliates of the State of Tennessee Off-Line (OLA) agencies, plus eligible former employees such as Tennessee Consolidated Retirement Systems (TCRS) retirees, and non-TCRS retirees and COBRA.	
<b>Sub-Process Description:</b> Personnel actions will establish eligibility for “Central State Employees”. Interfaces or online entry, by authorized agency staff, will establish eligibility for “Participants”. Edison will perform edits to determine whether it is a newly eligible or previously eligible “Central State Employee” or “Participant”.  “Central State Employees”, utilizing Employee Self-Service (ESS) if available, authorized agency staff or Benefits Administration will enter the “Participants” or “Central State Employees” benefits selection or changes. Dependent’s eligibility and enrollment will be established or updated in this manner as well. Some benefits that are available to a “Central State Employee” are: Flexible Benefits Expenditure Accounts, Deferred Compensation, Medical, Dental, or Life Insurance and Long-term Care Programs. Currently, “Participants” are eligible for medical and dental insurance only.  The eligibility criteria for “Central State Employees”, “Participants” and dependents will be predefined in the system as determined by Tennessee Code Annotated, Internal Revenue Code and Insurance Plan Documents. Eligibility data will be continually monitored by the system to ensure that program integrity is maintained. If a covered employee, participant and/or dependent becomes ineligible based on this criteria, the system will automatically issue notice, terminate the enrollment and/or eligibility and generate the applicable conversion applications in compliance with COBRA and HIPAA guidelines.  Daily interfaces to vendors will provide updates to the “Central State Employees”, “Participants” and dependents records for issuing identification cards and claims processing.	

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<b>Sub-Process Name:</b> Eligibility and Enrollment		<b>Sub-Process Identifier:</b> BA-01	
<b>Sub-Process Trigger(s):</b> <ul style="list-style-type: none"><li>• New eligible “Central State Employee”/”Participant”/dependent</li><li>• Previously eligible not enrolled employee/participant/dependent</li><li>• Changes to existing “Central State Employee”/”Participant”/dependent</li><li>• Annual enrollment/transfer periods</li></ul>		<b>Key Sub-Process Participants:</b> <ul style="list-style-type: none"><li>• “Central State Employee”/”Participant”</li><li>• Benefits</li><li>• Agencies (includes UT, TBR, LG, LE, TCRS, and OLA)</li><li>• Vendor</li></ul>	
<b>Inputs:</b>			
<b>Input</b>	<b>Format</b>	<b>Volume/Time</b>	<b>Suppliers</b>
“Central State Employee”/”Participant” and dependent eligibility & enrollment or maintenance	Direct online entry	14,000/month all sources	“Central State Employee”, ”Participant”
“Central State Employee”/”Participant” and dependent eligibility & enrollment or maintenance	Interface file	14,000/month all sources	TCRS, UT, TBR, Local Education, Local Government
“Central State Employee” ”Participant” and dependent eligibility & enrollment or maintenance from agencies with direct access	Paper document/Direct online entry	14,000/month all sources	“Central State Employee”, ”Participant”, Agencies Benefits Coordinator
“Central State Employee” ”Participant” and dependent eligibility & enrollment or maintenance from agencies without direct access	Paper documents to Insurance Admin. for online entry	14,000/month all sources	“Central State Employee”, ”Participant”, Agencies Benefits Coordinator

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"Central State Employee" "Participant" and/or dependent eligibility & enrollment or maintenance	Interface file	20/daily; all sources	Vendors
Registration and updates for Wellness and Employee Assistance programs & seminars or programs	Online ESS, Email, Phone	Daily	"Central State Employee", "Participant"
<b>Outputs:</b>			
<b>Output</b>	<b>Format</b>	<b>Volume/Time</b>	<b>Recipients</b>
Confirmation of adds or changes	Email, letter	14,000 monthly	"Central State Employee", "Participant", Agency, Benefits Administration
Eligibility/Enrollment Totals Report	Online	Monthly	Benefits Administration
Update Transactions	Interface	Daily, Weekly, Monthly	Benefits Administration, Vendor, Agency
COBRA Eligibility Notification	Letter	Daily	"Central State Employee", "Participant", Benefits Administration
Certificate of Coverage	Letter	As needed, Monthly	"Central State Employee", "Participant", Benefits Administration
Registration status reports for Wellness and Employee Assistance Programs or Seminars	Online, Email	As needed, daily, monthly	Benefits Administration
<b>Performance Measures Tracked:</b>			

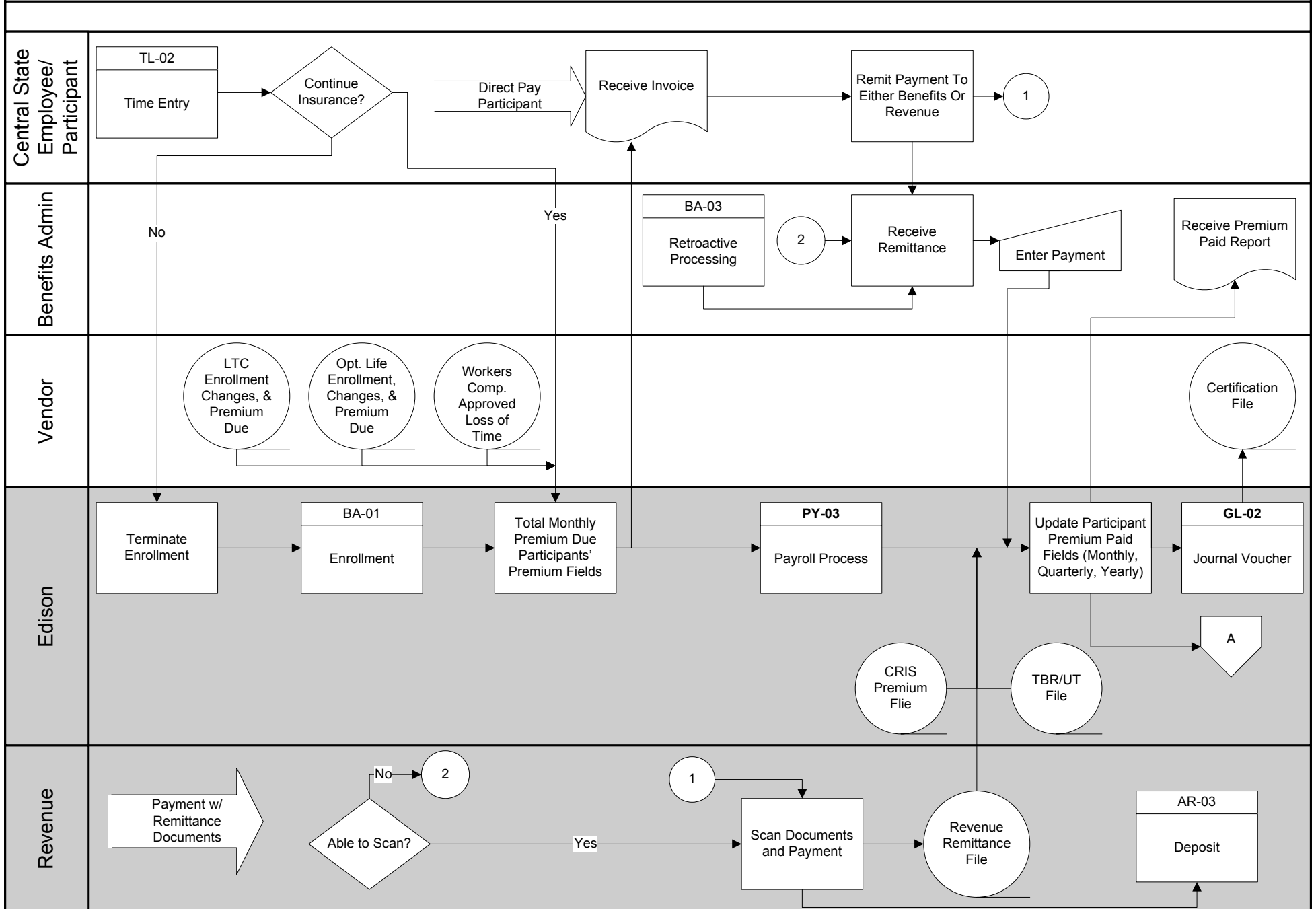
<b>Process Name:</b> Benefit/Insurance Administration	<b>Process Identifier:</b> BA	
<b>Sub-Process Name:</b> Eligibility and Enrollment	<b>Sub-Process Identifier:</b> BA-01	
<b>Measure</b>	<b>Current Value</b>	<b>Target Value</b>
Personnel transactions that are terminating a Central State Employee’s employment must automatically terminate the employee’s benefits.	90%	100%
Previously eligible employees must provide documentation or be approved through medical underwriting before they are allowed to enroll.	100%	100%
<b>Law, Policy, or Statute Site That Govern Sub-Process:</b>		
<b>Law, Policy, or Statute</b>		<b>Change Required (Yes/No)?</b>
TCA Title 8 Chapter 25, 27 & 35		No
COBRA		No
HIPAA		No
State Plan Document requires split contracts for spouses if both are “State Employees” (Central State, University of Tennessee, or Tennessee Board of Regents). This policy will need to be changed to allow one spouse to maintain family coverage, which treats the other spouse as a dependent. The eligibility rules would need to be changed allowing an eligible dependent child of either employee to be covered. This dependent child may or may not be living in the home, or may or may not be covered on the Head of Contract’s (HOC) Federal Income Tax, but must remain an eligible dependent of either employee. Both employees will be provided the State paid portion of Basic & AD&D Life Coverage, and will be available to elect any additional amounts up to the maximum according to their individual salary and/or age.		Yes



<b>Process Name:</b> Benefit/Insurance Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Eligibility and Enrollment	<b>Sub-Process Identifier:</b> BA-01
<b>Key Assumptions:</b> <ul style="list-style-type: none"><li>• “Central State Employees” eligibility data will be integrated to the Insurance and Benefits modules.</li><li>• “Participants” eligibility will be processed via interfaces or online entry.</li><li>• System provides for non-“Central State Employees” processing.</li><li>• ESS will be available to “Central State Employees”.</li><li>• System will have ability to scan required documents for previously eligible “Central State Employees” or “Participants” with life changing events.</li><li>• Electronic signatures will be accepted by all vendors.</li><li>• Scanning capabilities for various documents.</li><li>• ESS will provide links to third party vendors for “Central State Employee” and “Participant” for associated benefit information.</li><li>• Quarterly reconciliations will be needed for synchronization purposes.</li><li>• System will be fully compliant with all COBRA and HIPAA Federal requirements.</li><li>• Employee ID number to be used in addition to Social Security Number.</li></ul>	

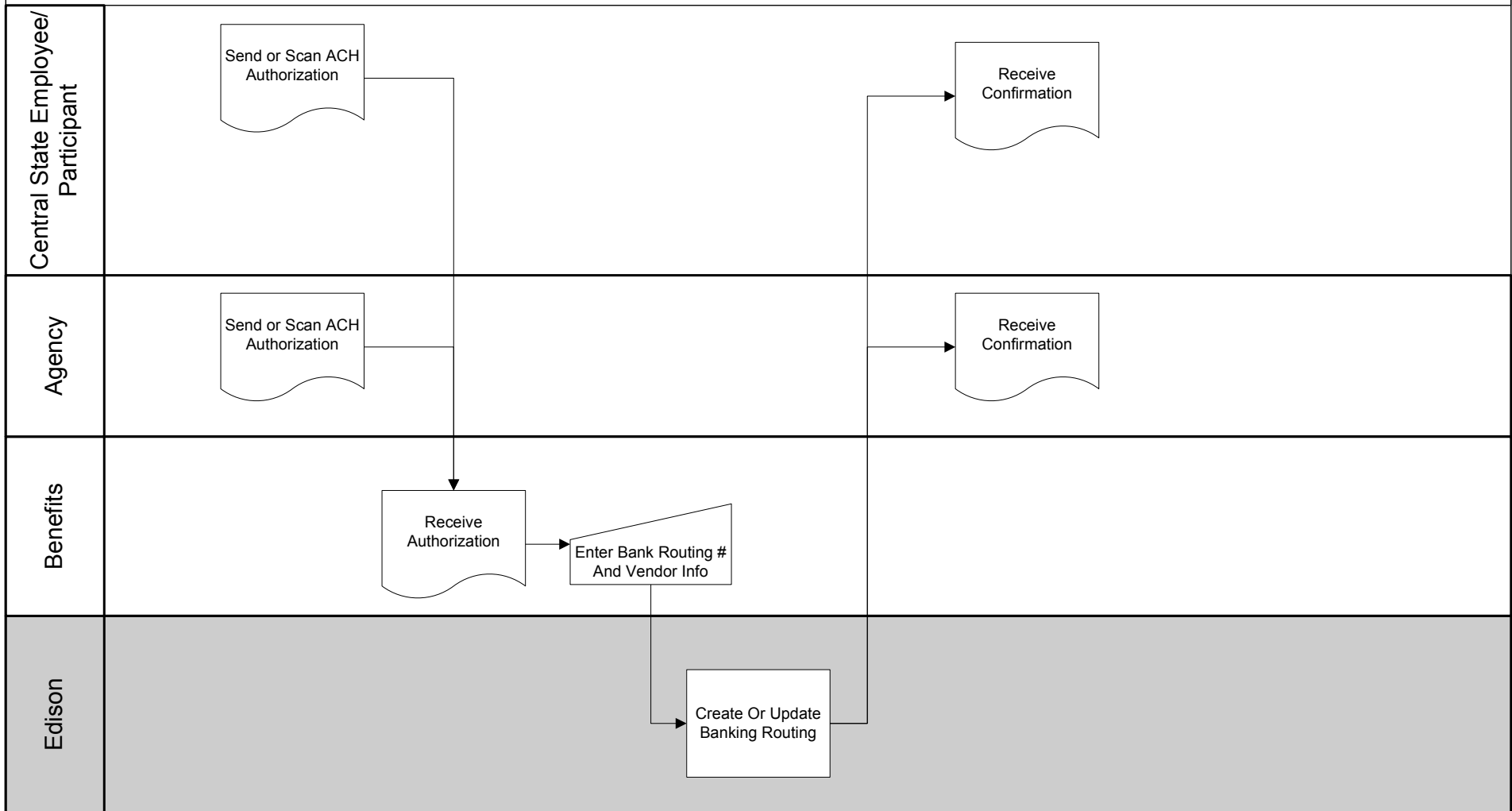
<b>Process Name:</b> Benefit/Insurance Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Eligibility and Enrollment	<b>Sub-Process Identifier:</b> BA-01
<b>Improvements:</b> <ul style="list-style-type: none"><li>• Employee Self-Service for changing basic information on-line by utilizing self-service functionality through a web browser.</li><li>• Integration with Personnel will establish and maintain “Central State Employees” eligibility. Correct and timely entry of termination should prevent unnecessary forfeitures of employee medical and/or dental insurance premiums due to terminating coverage prematurely.</li><li>• System will allow and maintain multiple eligibility types and enrollment periods.</li><li>• Automatically notify employees of benefits for which they are eligible and/or automatically enrolled.</li><li>• Automatically record employee as late applicant if enrollment is not elected within initial enrollment period.</li><li>• Unique codes will be used to identify “Central State Employees” and “Participants” automatically when overrides are used for “grandfathering”; otherwise treated as ineligible participants.</li><li>• Eligibility codes will be used for all (active, retired or COBRA) that will alleviate the need for special handling of inactive participants.</li><li>• Allow future enrollments for head of contract and/or dependents.</li><li>• Annual changes to insurance programs and flexible expenditure accounts will be processed online utilizing ESS.</li><li>• Historical data (eligibility, demographic, enrollment, collections, etc.) will be accessible to defined users and will not require specialized personnel.</li><li>• Same day error corrections will prevent incorrect billings and vendor transactions.</li><li>• Vendor interface for late applicant processing will alleviate the need for duplicate data entry.</li><li>• Interfaces with agencies such as Treasury and the Workers Compensation vendor will eliminate duplicate processing and prevent overpayments through payroll.</li><li>• Ability to scan documents will expedite reimbursements from flexible expense accounts and approval of special insurance enrollment requests.</li><li>• Automatically calculate maximum allowable Deferred Compensation deductions per IRS guidelines.</li><li>• Produce all reports electronically and allow for local printing capabilities.</li><li>• Scanning abilities for required documents such as: Birth certificates, divorce decrees, student verification, flex expenditure receipts, etc.</li><li>• System should provide the ability to allow additional benefits in the future.</li><li>• “Enrollment Totals” reports will be produced with the ability to sort in various ways.</li></ul>	

<b>Process Name:</b> Benefit/Insurance Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Eligibility and Enrollment	<b>Sub-Process Identifier:</b> BA-01
<b>Change Management Concerns:</b> <ul style="list-style-type: none"><li>• Additional computers or kiosks will be needed in various locations throughout the State.</li><li>• Moving responsibility for basic benefits administration from centralized agency authority to ESS.</li><li>• Eligibility, enrollment and premium processing rules and procedures will need to be reviewed and possibly altered.</li><li>• Organization of business units will need to be reviewed and possibly restructured.</li><li>• Vendors may need to modify their processes to handle daily interfaces</li></ul>	<b>Communication Actions:</b> <ul style="list-style-type: none"><li>• Training</li><li>• Meeting with stakeholders</li><li>• Meeting with agency users and administration</li></ul>
<b>Eliminated Non-Core Systems:</b> <ul style="list-style-type: none"><li>• Phoenix Computer Based Tennessee Insurance System (TIS) Training</li><li>• Excel spreadsheet of "Grandfathered" participants</li><li>• Access database of Agencies and TIS Users</li><li>• Access database of Wellness Programs Enrollees</li></ul>	



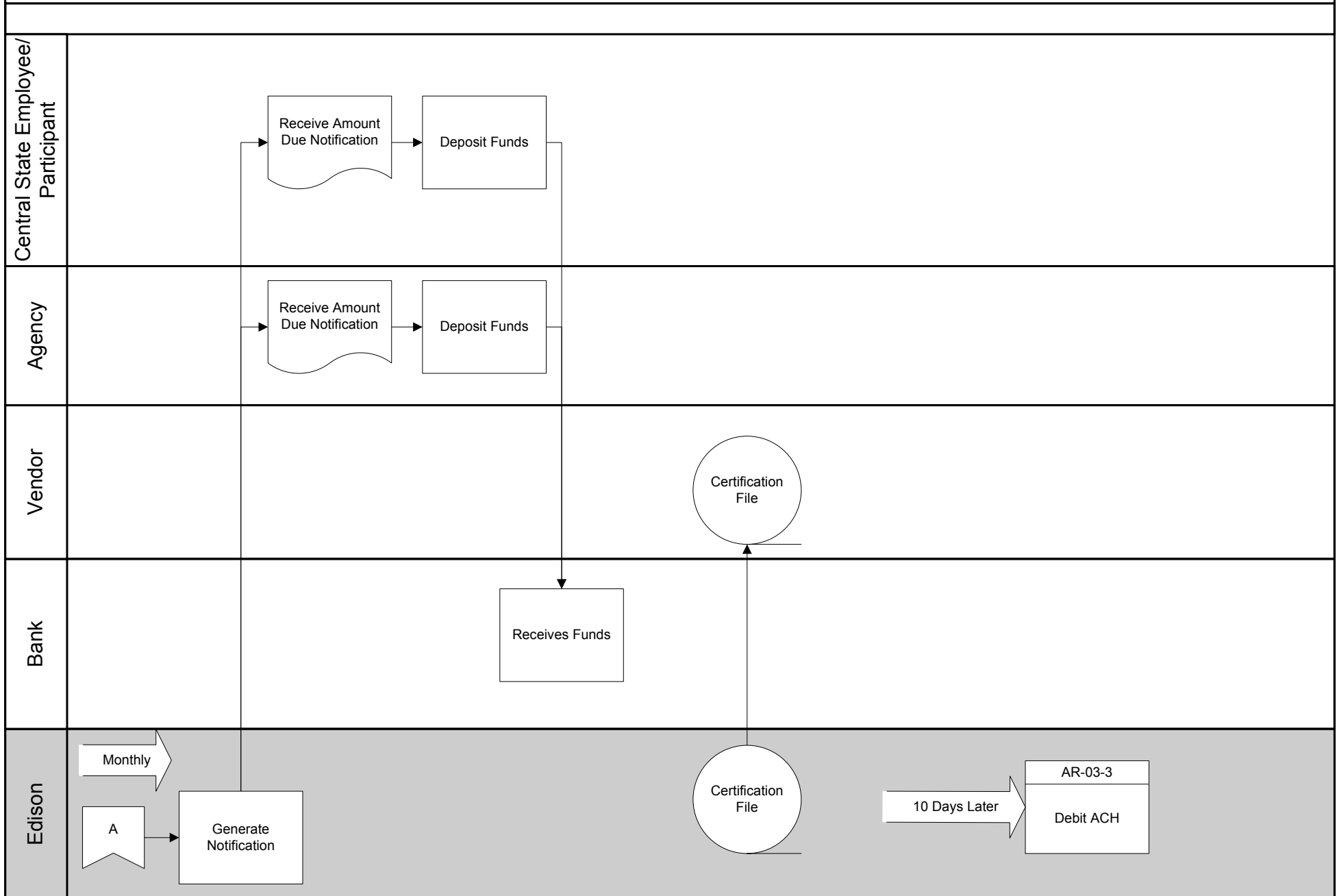
**Process:** Benefits/Insurance Administration  
**Sub-Process:** BA-02 Premium Processing – Payments by ACH  
**Prepared By:** Project Edison – State of Tennessee

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**Process:** Benefits/Insurance Administration  
**Sub-Process:** BA-02 Premium Processing – Payments by ACH  
**Prepared By:** Project Edison – State of Tennessee

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<b>Process Name:</b> Benefits/Insurance Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Premium Processing	<b>Sub-Process Identifier:</b> BA-02
<b>Sub-Process Purpose and Objectives:</b> The Premium Processing sub-process will establish and maintain the premiums, collections, and/or contributions for various benefit options available to “Central State Employees” and “Participants.”	
<b>Sub-Process Description:</b> Insurance programs, premiums, and vendor information will be established within the Insurance Administration module and integrated with the Benefits Administration module where additional benefits (flex expenditure amounts and deferred compensation contribution) will be maintained. “Central State Employees” will identify the programs for which they wish to enroll in or amounts they wish to contribute using ESS. An authorized agency user may also do this. Deductions will be taken within the Payroll module, and integrated with the Benefits Administration module for “Central State Employees”. Employees that are on Leave without Pay may not be eligible for the State Insurance premium match and will be billed directly until their return. If an agency fails to report employees that are on leave and the employee fails to submit insurance premium payments, the agencies may be subject to the both the employee and employer medical premium.  Authorized users with the appropriate security level, will be able to post various types of collections directly to an individual’s account. Payments can be received from the “Central State Employee”/“Participant, from their employer or from both. Identifying fields in the system will be used to determine the source of the payments.  The system will allow for a deferral period of one month. Notifications will be generated to the “Central State Employee”/“Participant and or agencies informing of the deferral and amounts in arrears. If a payment is not received by the month-end close date (second deferral month), the system will automatically cancel the programs and prevent the re-enrollment without proper approvals.  The Insurance Administration module will interface daily with the Tennessee Consolidated Retirement Information System (CRIS) and the State Department of Revenue for various updates. Insurance premiums for TCRS participants will be collected in CRIS and interfaced to the Edison system. Daily, weekly and monthly interfaces with the various insurance vendors will be used to update employees enrollment and payment status, paid (certified), or unpaid (un-certified/hold claims do not process).	

<b>Process Name:</b> Benefits/Insurance Administration		<b>Process Identifier:</b> BA	
<b>Sub-Process Name:</b> Premium Processing		<b>Sub-Process Identifier:</b> BA-02	
<b>Sub-Process Description:</b> (continued)			
Agencies or “Participants” that are insured through a State sponsored insurance program are required to remit premium payments via ACH bank draft. Former “Central State Employees” and “Participants” (COBRA and Retirees) may also elect to remit payments via ACH.			
“Participant’s” basic demographic/eligibility information (e.g., identification number, name, address, county codes, age, agency/group identification, hire date, appointment codes and collection method) will be established and maintained within the Benefits/Insurance Administration module and used for Insurance purposes only. This information is needed to determine the insurance programs and associated premium amounts, for which the “Participants” are eligible. Monthly premium amounts due will be billed to agencies for their employees and to individual “Participants” (Retirees and COBRA) that are on a direct payment plan. Premiums are collected from UT, TBR, LG, LE, TCRS, and OLA using an ACH bank draft. Individuals will have flexibility to request payment with ACH or elect to pay directly with cash, checks or money orders.			
“Participants” or agencies will enter the request for ACH payment and scan all required documents. Once the ACH data is established, a monthly notification/billing will be generated informing the “Participants” of the amounts that will be deducted from their accounts.			
<b>Sub-Process Trigger(s):</b> <ul style="list-style-type: none"><li>• New “Central State Employee”/”Participant”/dependent enrollment</li><li>• Changes to existing enrollment</li><li>• Retirement Payroll Process</li><li>• Monthly billing</li><li>• Receipt of direct payments</li><li>• Previous “Central State Employee”/”Participant”</li><li>• Previously eligible dependent</li></ul>		<b>Key Sub-Process Participants:</b> <ul style="list-style-type: none"><li>• “Central State Employee”/”Participant”</li><li>• Benefits</li><li>• Agencies (includes UT, TBR, LG, LE, TCRS, and OLA)</li><li>• Revenue</li><li>• Vendor</li><li>• Bank</li></ul>	
<b>Inputs:</b>			
<b>Input</b>	<b>Format</b>	<b>Volume/Time</b>	<b>Suppliers</b>
Retirement Payroll Files	Interface	Monthly	Treasury/CRIS



<b>Process Name:</b> Benefits/Insurance Administration		<b>Process Identifier:</b> BA	
<b>Sub-Process Name:</b> Premium Processing		<b>Sub-Process Identifier:</b> BA-02	
ACH Routing Documents	Paper, scanned data	Monthly	"Central State Employee" "Participant", UT, TBR, LG, LE, TCRS, and OLA
Direct Payments	Cash, Check, Money Order, Manual JV	Monthly	"Central State Employee" "Participant", UT, TBR, LG, LE, TCRS, and OLA
Payment with Remittance	Interface	Monthly	Revenue
ACH Reconciliation	Interface	Monthly	Bank
Insufficient Funds Data	Interface	Monthly	Treasury
<b>Outputs:</b>			
<b>Output</b>	<b>Format</b>	<b>Volume/Time</b>	<b>Recipients</b>
Update participant/employee Master files	Database	260,000 monthly	"Central State Employee" "Participant", UT, TBR, LG, LE, TCRS, and OLA, Benefits Administration
Vendor files with certification & non-certification information	Interface	5,000 Weekly 260,000 monthly	Vendor
Payment due or past due notification	Email, paper document	1,500 Monthly	"Central State Employee" "Participant", UT, TBR, LG, LE, TCRS, and OLA
ACH Reconciliation	Interface	Monthly	Bank
Various other Notifications	Email, paper document	3,000 Monthly	Edison
<b>Performance Measures Tracked:</b>			
<b>Measure</b>	<b>Current Value</b>	<b>Target Value</b>	
Premiums are calculated, collected and processed accurately.	75%	100%	
Employee self-service is available 24/7	0	100%	
<b>Law, Policy, or Statute Site That Govern Sub-Process:</b>			
<b>Law, Policy, or Statute</b>			<b>Change Required (Yes/No)?</b>

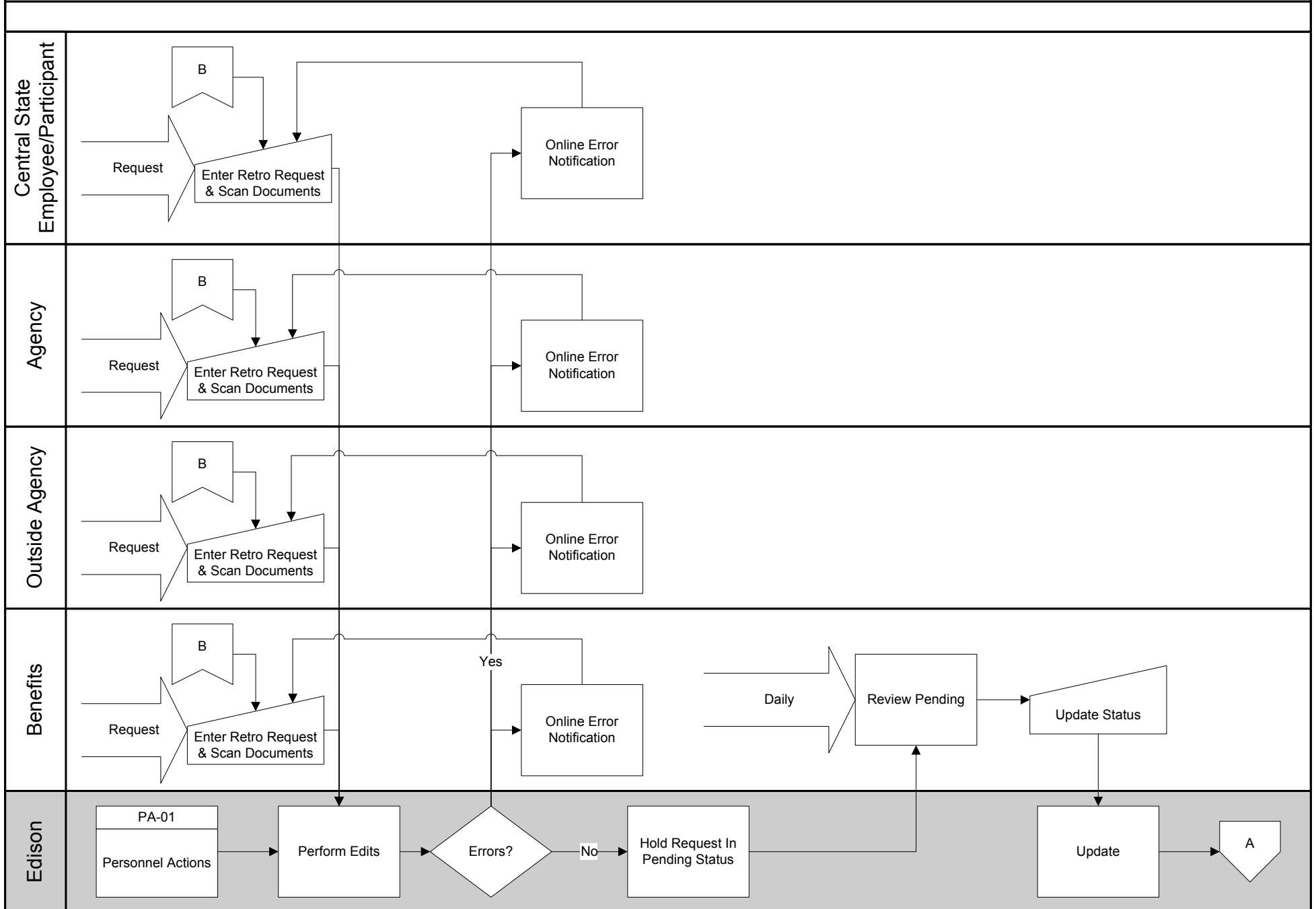
<b>Process Name:</b> Benefits/Insurance Administration	<b>Process Identifier:</b> BA	
<b>Sub-Process Name:</b> Premium Processing	<b>Sub-Process Identifier:</b> BA-02	
IRC Sections 457(b); 401(a); 401(k); 402; 415		No
IRC Section 125; 129; 132		No
T.C.A. 8-25-101 et seq		No
T.C.A. 8-25-301 et seq		No
T.C.A. 8-25-501 et seq		No
<b>Key Assumptions:</b> <ul style="list-style-type: none"><li>• Retirement contributions are processed in the Payroll Module with interface update to Treasury's TRACS.</li><li>• Deferred Comp collections are processed in the Payroll Module and interfaced to the vendor.</li><li>• Flexible Expenditure reimbursement will be processed inside the Accounts Payable module with balances indicated on the payroll remittance advice.</li><li>• Retirement payroll is interfaced to the Insurance Administration Module.</li><li>• All "Participants" and "Central State Employees" will have the option of ACH collections.</li><li>• Employee ID number to be used in addition to Social Security Number.</li></ul>		

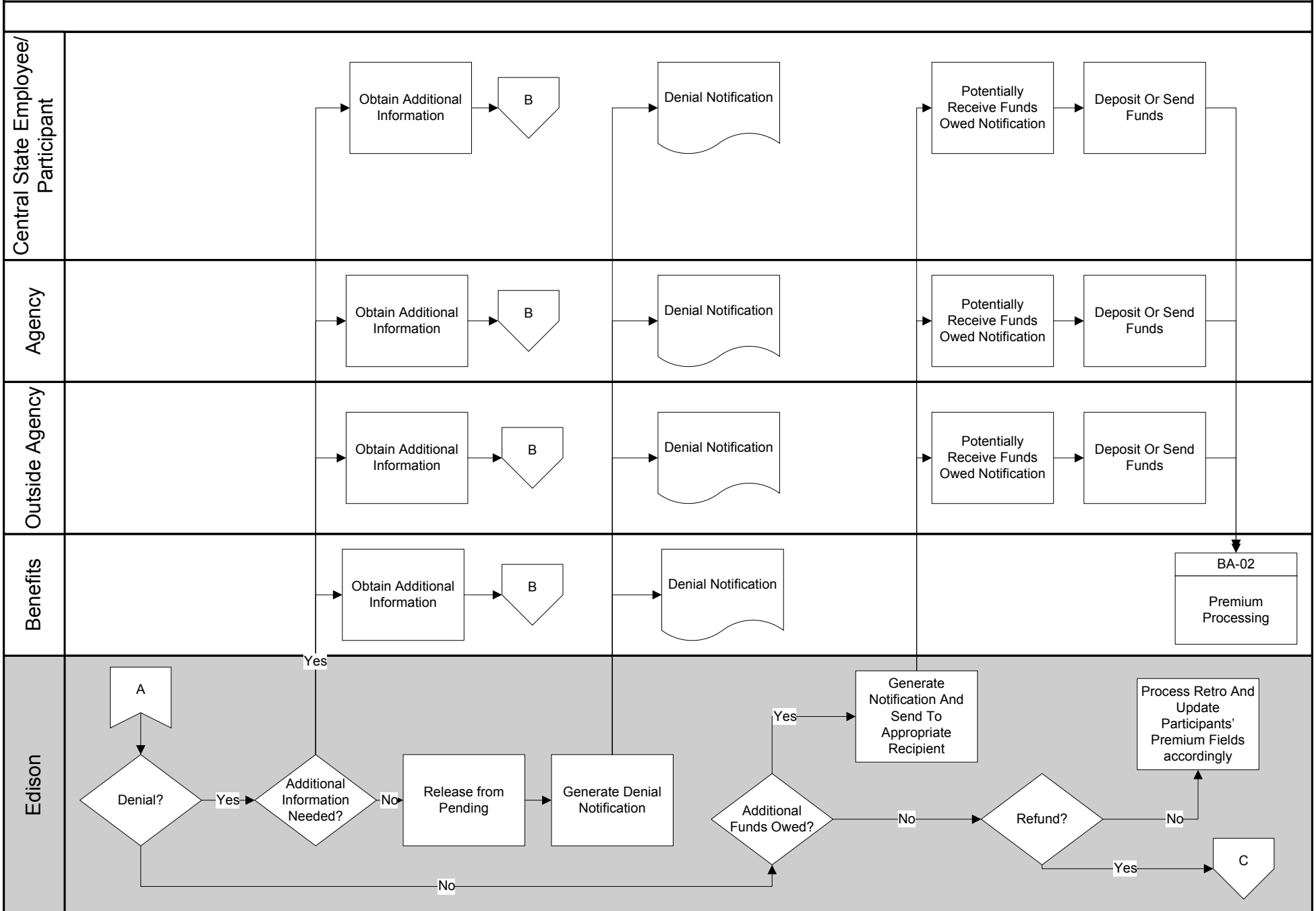
<b>Process Name:</b> Benefits/Insurance Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Premium Processing	<b>Sub-Process Identifier:</b> BA-02
<b>Improvements:</b> <ul style="list-style-type: none"><li>• System will provide the ability to post all types of collections, (employee &amp; employer) to an individual's account.</li><li>• System will provide the ability to accept payments by credit card.</li><li>• System will allow enrollments across premium years, and correctly calculate the amounts due.</li><li>• Daily updates to vendors to allow payment of claims that are in a "hold status" will allow for efficiency in processing and approval of benefits.</li><li>• Daily updates to vendors to process hold claims in the event of receiving insufficient funds information will prevent overpayments for claims.</li><li>• Insurance payments can be posted to an individual's insurance account and systematically applied to programs in a prioritized manner.</li><li>• Overpayments will be refunded utilizing a single transaction versus multiple transactions in the current system.</li><li>• Automatically begin update process based on calendar.</li><li>• Automatically notify all parties involved in refund process.</li><li>• Integration with the Financial Management module will provide the ability to resolve discrepancies in a timely manner.</li><li>• Online real-time inquiry into the Financial and Payroll modules will expedite reconciliation.</li><li>• Automatic online notification of canceled payments to prevent overpayments.</li><li>• System will automatically track and calculate retroactive deductions.</li><li>• Provide comprehensive tracking of deduction history.</li><li>• Provide the ability for employees to participate in Parking &amp; Public Transportation Plan utilizing tax-free dollars.</li><li>• System will allow for efficient processing of error corrections.</li><li>• Collection of payments for future coverage periods.</li><li>• Inquiry into all payment history, including overpayments and refunds.</li></ul>	

<b>Process Name:</b> Benefits/Insurance Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Premium Processing	<b>Sub-Process Identifier:</b> BA-02
<b>Change Management Concerns:</b> <ul style="list-style-type: none"><li>• Eligibility, enrollment and premium processing rules and procedures will need to be reviewed and possibly altered.</li><li>• Organization of business units will need to be reviewed and possibly restructured.</li><li>• Additional computers or kiosks will be needed in various locations throughout the State.</li><li>• Moving responsibility for basic benefits administration from centralized agency authority to ESS.</li><li>• Vendors will need to modify their processes to handle daily interfaces.</li></ul>	<b>Communication Actions:</b> <ul style="list-style-type: none"><li>• Training</li><li>• Meeting with stakeholders</li><li>• Meeting with agency users and administration</li></ul>
<b>Eliminated Non-Core Systems:</b> <ul style="list-style-type: none"><li>• Phoenix Computer Based TIS Training.</li><li>• Access database of TIS Agencies and Users</li></ul>	

**Process:** Benefits/Insurance Administration  
**Sub-Process:** BA-03 Retroactive Processing  
**Prepared By:** Project Edison – State of Tennessee

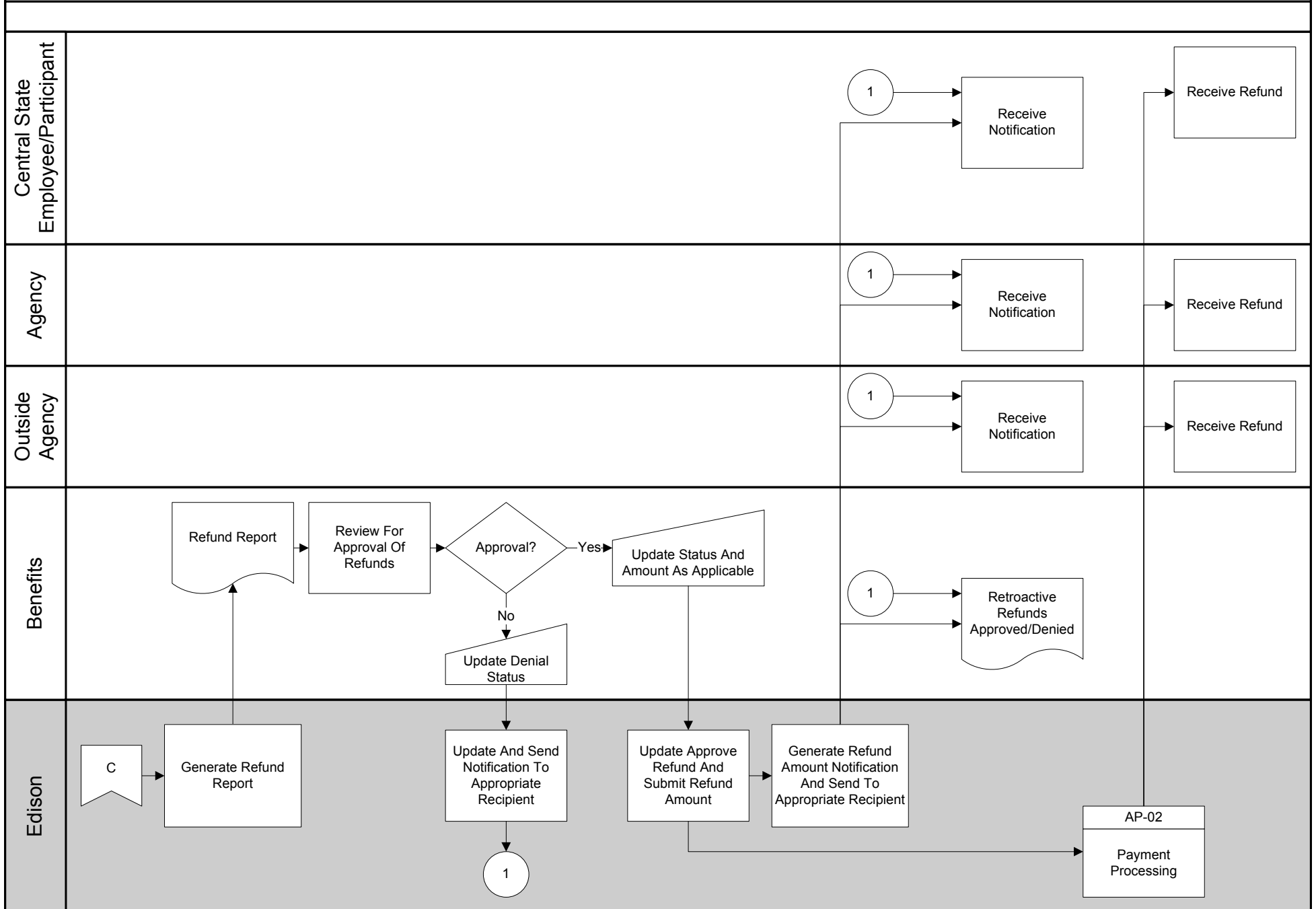
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**Process:** Benefits/Insurance Administration  
**Sub-Process:** BA-03 Retroactive Processing  
**Prepared By:** Project Edison – State of Tennessee

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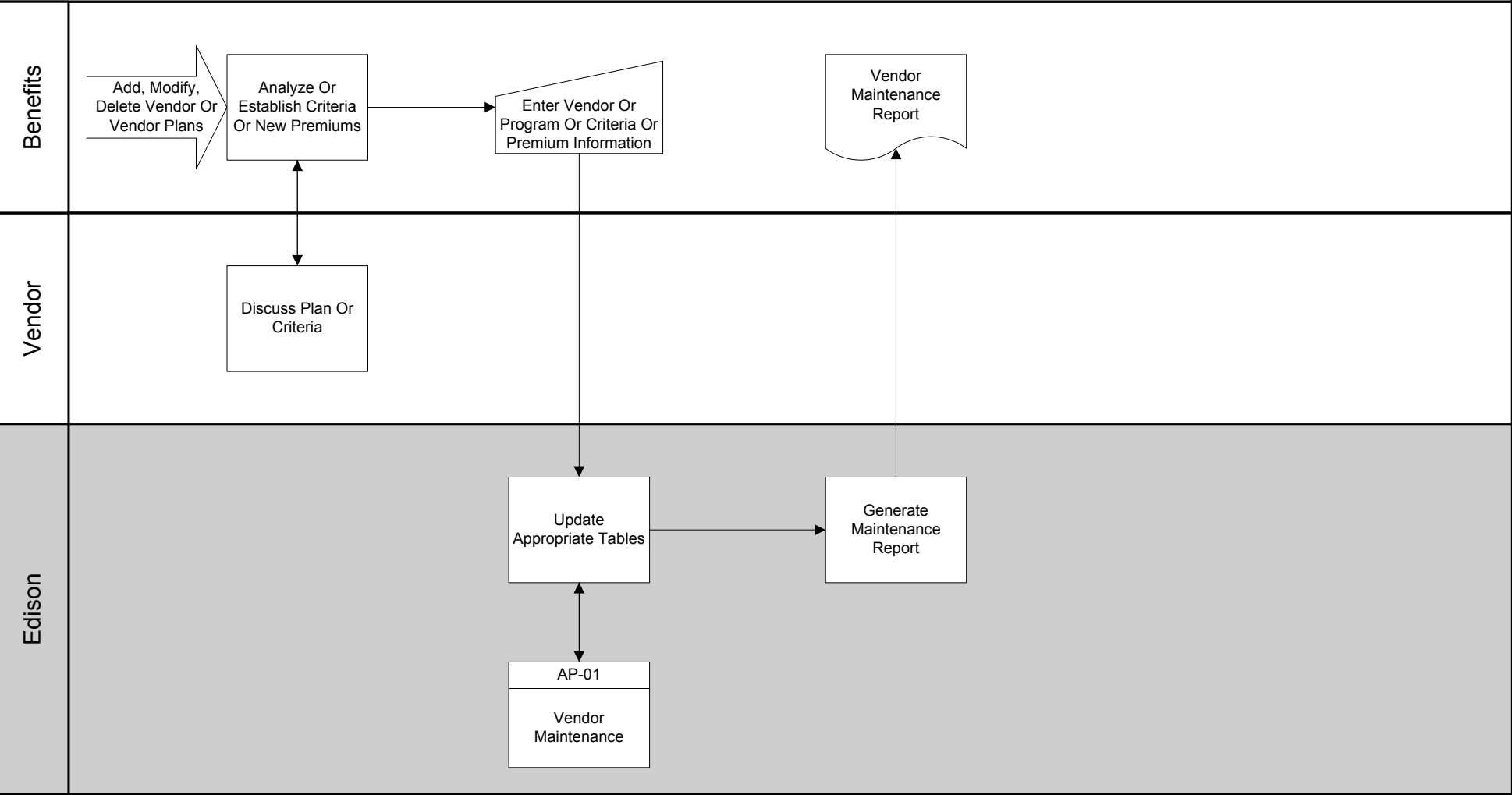
<b>Process Name:</b> Benefit Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Retroactive Processing	<b>Sub-Process Identifier:</b> BA-03
<b>Sub-Process Purpose and Objectives:</b> The Retroactive Processing sub-process will provide the ability to process retroactive transactions utilizing an ERP Benefit/Insurance module.	
<b>Sub-Process Description:</b> Retroactive transactions for “Central State Employees” can be initiated within the Personnel Module, requested online through Employee Self Service (ESS) or by an authorized agency user. These transactions will be integrated with the Payroll, Benefits and Insurance modules as applicable, and create the appropriate accounting transactions needed for accurate processing. A Personnel transaction that reinstates employment may automatically reinstate and calculate collection amounts for all previously-elected benefits (insurance, deferred compensation and/or flexible accounts) for the employee and previously-covered dependents, after validating eligibility. The amounts due for these benefits will be automatically calculated and deducted prior to issuing a lump sum pay check or direct deposit. The deductions will be integrated with the Benefits and Insurance modules for updating the employee records and the various vendors.  Transactions will be suspended pending the approval of Benefits Administration. Notification will be generated to the requestor and Benefits Administration. Approval will require two steps if excess funds are created. The first step will release the transaction for processing, and the second step will approve the amount of excess premiums to be refunded to the individual or employer. Excess premiums may be retained to repay ineligible expenses or claims previously paid.  Approved transactions that require additional funds will be updated beginning with the oldest month and continue through to the current month as collections allow. Updates will occur immediately following the collection of needed funds. If additional funds are not paid, the transaction will be deleted and the correct reverse accounting transactions created.  Retroactive transactions that can be initiated with personnel transactions, ESS, online by the agency user, or in certain situations systematically (e.g., failure to pay or by submit payment with invalid checks/premiums), will create a retroactive cancellation to the last paid period.  Email or hard copy notifications will be generated to the participant and/or agency for confirmation of the request. Confirmation will also include information concerning additional funds that may be needed to update the transaction with the appropriate approval. Additionally, notifications will be generated to the Benefits Administrator for approval. Additional funds will be processed at BA-02 Premium Processing.	

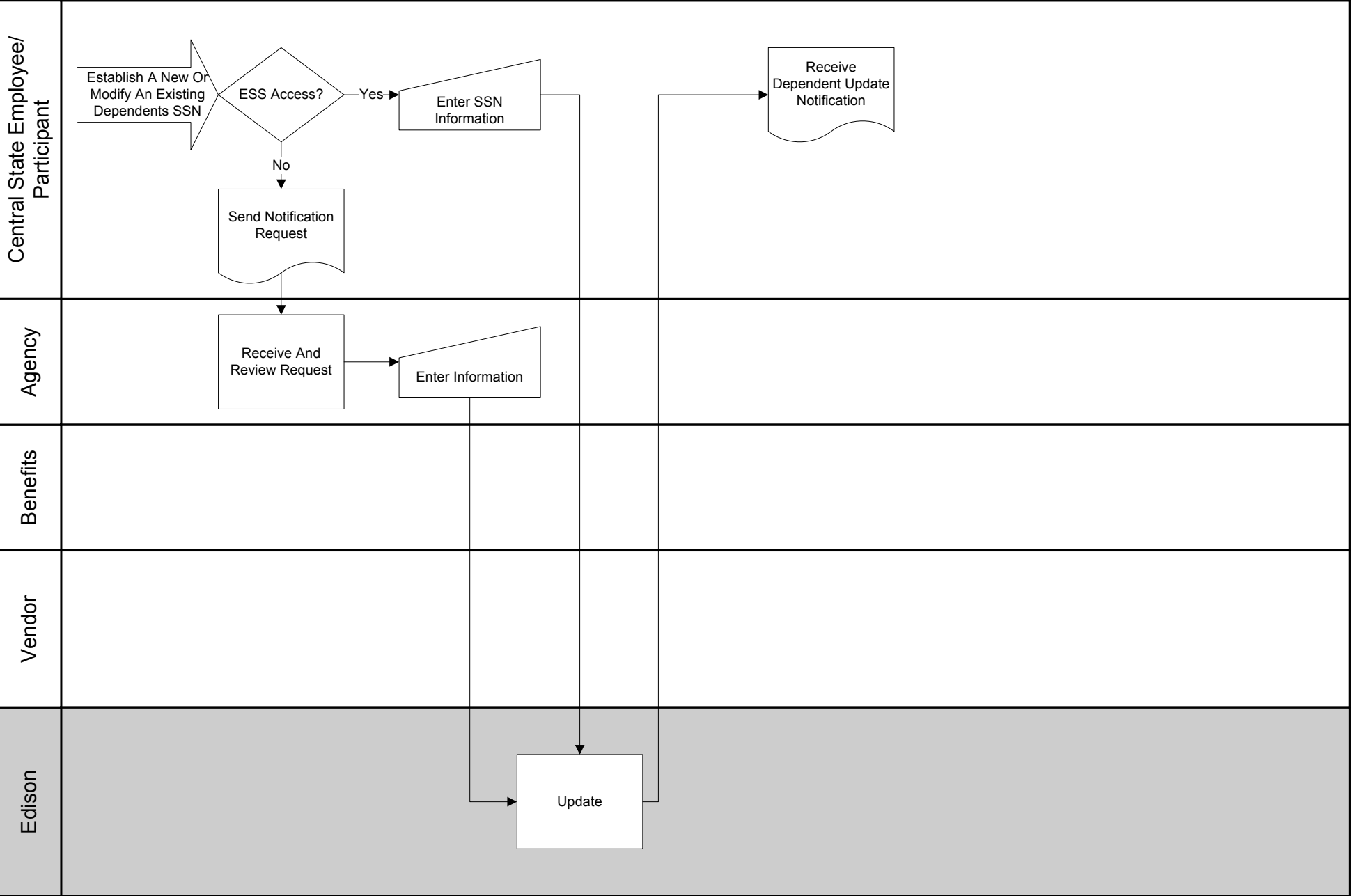


<b>Process Name:</b> Benefit Administration		<b>Process Identifier:</b> BA	
<b>Sub-Process Name:</b> Retroactive Processing		<b>Sub-Process Identifier:</b> BA-03	
<b>Sub-Process Trigger(s):</b> <ul style="list-style-type: none"><li>New and changes to existing “Central State Employee”/”Participant”</li></ul>		<b>Key Sub-Process Participants:</b> <ul style="list-style-type: none"><li>“Central State Employee”/”Participant”</li><li>Agencies (includes UT, TBR, LG, LE, TCRS, and OLA)</li><li>Vendor</li><li>Benefits</li></ul>	
<b>Inputs:</b>			
<b>Input</b>	<b>Format</b>	<b>Volume/Time</b>	<b>Suppliers</b>
ESS Request for change	Direct online entry	250/monthly all sources	“Central State Employees” ”Participants”
Request for change	Paper Document, Direct online entry	250/monthly all sources	“Central State Employees” ”Participants”, UT, TBR, LG, LE, TCRS, and OLA
Request for change	Interface file	250/monthly all sources	UT, TBR, LG, LE, TCRS, and OLA
Request for change	Paper documents to Insurance Admin. for online entry	250/monthly all sources	“Central State Employees” ”Participants”, UT, TBR, LG, LE, TCRS, and OLA
Supporting Documentation	Scanned Documents	250/monthly all sources	“Central State Employees” ”Participants”, UT, TBR, LG, LE, TCRS, and OLA
<b>Outputs:</b>			
<b>Output</b>	<b>Format</b>	<b>Volume/Time</b>	<b>Recipients</b>
Employee master file	Database	250/monthly all sources	ERP users
Pending Notification	Email, Paper Notification	250/monthly all sources	Head of Contract, Employer
Pending Notifications	Email, Online	250/monthly all sources	Authorized Approver
Pending Transactions	Interface	12.5/daily all sources	Vendor
Update Transaction	Interface	12.5/daily all sources	Vendor
Retroactive Transaction Report	Online	Daily	User

<b>Process Name:</b> Benefit Administration		<b>Process Identifier:</b> BA	
<b>Sub-Process Name:</b> Retroactive Processing		<b>Sub-Process Identifier:</b> BA-03	
Retroactive Transaction Summary	Online	Monthly	User
Retroactive Excess Report	Online	Daily	User
Distribution of Excess Report	Online	Daily	User
<b>Performance Measures Tracked:</b>			
<b>Measure</b>	<b>Current Value</b>		<b>Target Value</b>
Update employee records and generate accurate interface transactions to vendor	80%		100%
Create accurate accounting transactions	75%		100%
Create accurate notifications	75%		100%
<b>Law, Policy, or Statute Site That Govern Sub-Process:</b>			
<b>Law, Policy, or Statute</b>			<b>Change Required (Yes/No)?</b>
None			
<b>Key Assumptions:</b> <ul style="list-style-type: none"> <li>• “Central State Employees” employment/eligibility data will be integrated from the Personnel Actions module with the Insurance and Benefits modules.</li> <li>• “Participants” eligibility and/or employment data will be processed via interfaces or online entry.</li> <li>• ESS will be available to “Central State Employees” for initiating retroactive transactions.</li> <li>• Electronic signatures will be accepted by all vendors.</li> </ul>			

<b>Process Name:</b> Benefit Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Retroactive Processing	<b>Sub-Process Identifier:</b> BA-03
<b>Improvements:</b> <ul style="list-style-type: none"> <li>Employee ID number to be used in addition to social security number.</li> <li>Changes that do not require additional funds or have the funds available are processed in real time, and updates are generated to vendors daily, so individuals have access to medical and/or dental benefits.</li> <li>Some employee data can be accessed and updated by "Central State Employees" online by utilizing self-service functionality through a web browser.</li> <li>Required documents scanned to expedite approval and record retention (e.g., birth certificates, divorce decrees, marriage certificates, etc.)</li> <li>Email notification generated to individual and/or agency for confirmation of request.</li> <li>Automatic notification to agency personnel when retroactive transactions are entered by the individual.</li> <li>Automatic notification to benefits personnel when retroactive transactions are entered by the individual or agency.</li> <li>System automatically tracks and calculates retroactive deductions.</li> </ul>	
<b>Change Management Concerns:</b> <ul style="list-style-type: none"> <li>Where appropriate, data entry will be transferred to the individual via self-service functionality. This change shifts the responsibility from Insurance Administration &amp; Treasury personnel to individuals and authorized agency staff, resulting in a cultural impact as Insurance Administration and Treasury personnel accept less control of input.</li> <li>Record retention will move from paper media to scanned online documents.</li> <li>Eligibility, enrollment and premium processing rules and procedures will need to be reviewed and possibly altered.</li> <li>Organization of business units will need to be reviewed and possibly restructured.</li> </ul>	<b>Communication Actions:</b> <ul style="list-style-type: none"> <li>Communicate proposed changes with Insurance Administration and Treasury as they become known and agency users beginning in the fall 2005. Continue communicating changes until go live.</li> <li>Communicate with department heads and Third Party Agencies regarding increased need for computers and scanning equipment to accommodate self-service functions in field offices.</li> <li>Communicate self-service functionality to State employees by pay stub inserts, Your Health Network newsletter and Project Edison newsletters, beginning in 2006.</li> <li>Provide training to assigned agency users and employees for self-service functions.</li> </ul>
<b>Eliminated Non-Core Systems:</b> None	





<b>Process Name:</b> Benefits/Insurance Administration		<b>Process Identifier:</b> BA	
<b>Sub-Process Name:</b> Benefit Vendor Maintenance		<b>Sub-Process Identifier:</b> BA-04	
<b>Sub-Process Purpose and Objectives:</b> The Benefit Vendor Maintenance sub-process will establish and maintain specified criteria for benefit vendors, programs, premiums, and related criteria. The sub-process will establish and maintain “Central State Employee” and “Participant” eligibility as it relates to the individual employer’s Insurance Plans utilizing an ERP Benefits/Insurance module.			
<b>Sub-Process Description:</b> Flexible Benefits and Deferred Compensation benefit program’s eligibility criteria and the third party vendor data will be established and maintained within the Benefits Administration module. These programs are only available to “Central State Employees”.			
Insurance programs, premiums, vendor data, and other related eligibility criteria will be established within the Insurance module and integrated with the Benefits module. Employers’ (“Central State”, UT, TBR, LE, & LG agencies) and eligible former employees’ (Retirees/COBRA) group identification codes and demographic data will also be established and maintained in the Insurance Module. These codes will be used by Edison in determining the programs that are available to each specific group of Employees/Participants and dependents both active and inactive. The Insurance module will also be used to establish and maintain the agency assigned Benefits Coordinator’s information (e.g., name, postal address, email address, telephone number, etc.)			
Although Edison will use unique identifiers for “Central State Employees”/“Participants” and dependents, an individual’s Social Security Number may still be needed for various inquiry purposes. This process will provide the ability to correct an individual’s SSN and transfer all previous history to the corrected number.			
<b>Sub-Process Trigger(s):</b> <ul style="list-style-type: none"><li>• New or changes to vendor data/criteria</li><li>• New or changes to eligibility data/criteria</li><li>• New or changes to employer data/criteria</li><li>• New or changes to program data/criteria</li><li>• Annual Enrollment/Transfer Periods</li><li>• Social Security Number corrections</li></ul>		<b>Key Sub-Process Participants:</b> <ul style="list-style-type: none"><li>• Insurance Committee</li><li>• Agencies (includes UT, TBR, LG, LE, TCRS, and OLA)</li><li>• Tennessee Consolidated Retirement System</li><li>• Vendor</li><li>• Benefits/Insurance Administration</li><li>• “Central State Employees”/“Participants”</li><li>• Dependents</li></ul>	
<b>Inputs:</b>			
<b>Input</b>	<b>Format</b>	<b>Volume/Time</b>	<b>Suppliers</b>
Agency Data	Direct online entry	30 Monthly	Benefit Administration

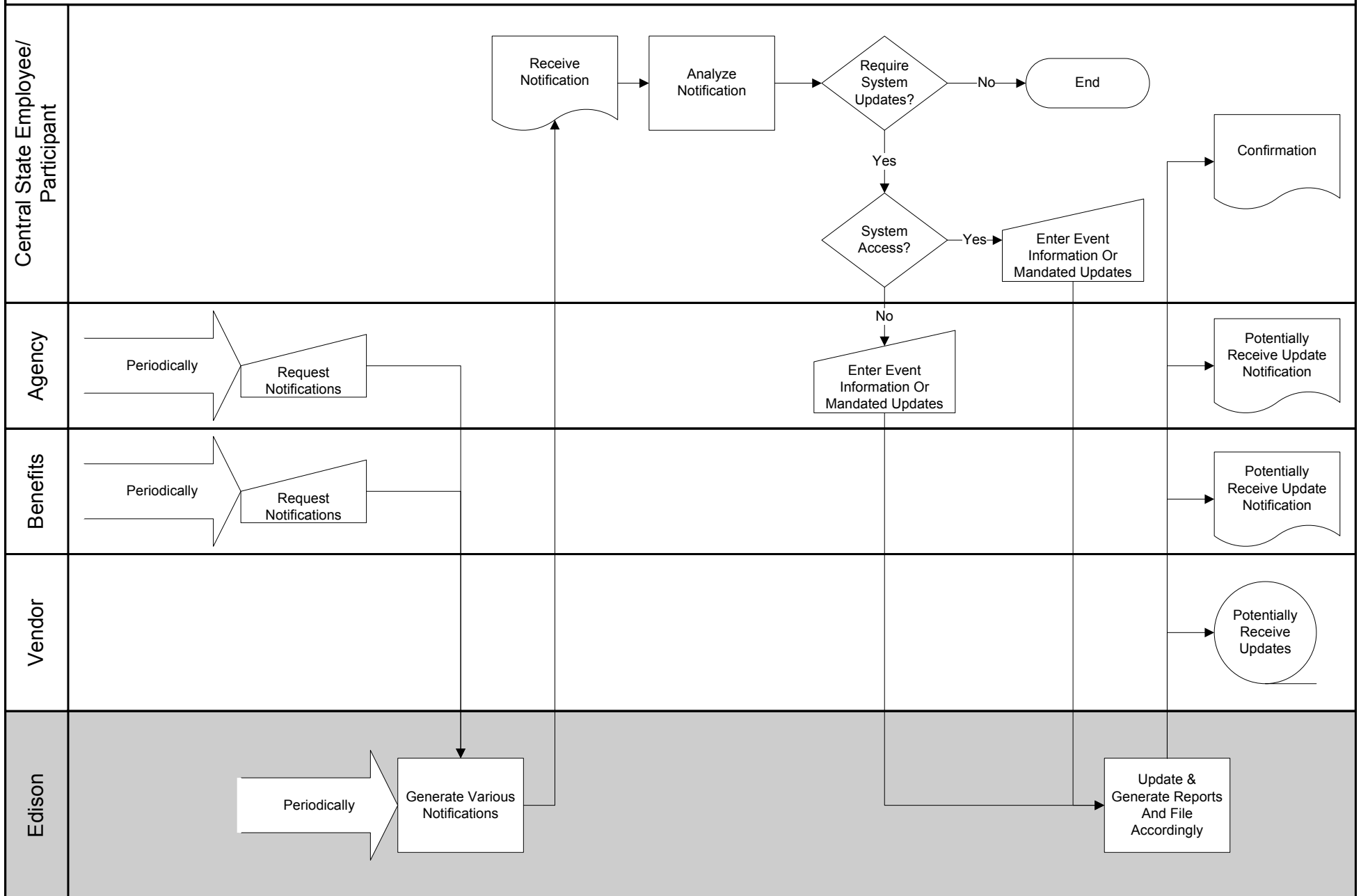
<b>Process Name:</b> Benefits/Insurance Administration		<b>Process Identifier:</b> BA	
<b>Sub-Process Name:</b> Benefit Vendor Maintenance		<b>Sub-Process Identifier:</b> BA-04	
Vendor Data	Direct online entry	Annually	Benefit Administration
Program Data	Direct online entry	Annually	Benefit Administration
Premiums	Direct online entry	Annually	Benefits Administration
Eligibility Criteria	Direct online entry	Annually	Benefit Administration
<b>Outputs:</b>			
<b>Output</b>	<b>Format</b>	<b>Volume/Time</b>	<b>Recipients</b>
Agency Master files updated	Database	30 Monthly	Benefit Administration
Vendor Master files updated	Database	Annually	Benefit Administration
Premiums Master files updated	Database	Annually	Benefit Administration
Eligibility Criteria updated	Database	Annually	Benefit Administration
Program Master files updated	Database	Annually	Benefit Administration
<b>Performance Measures Tracked:</b>			
<b>Measure</b>	<b>Current Value</b>		<b>Target Value</b>
Agencies have to ability to update and inquire on their employees	100%		100%
Employee/Participant program certification information is provided to the correct vendor.	100%		100%
Correct premium calculations for employees, employers and participants.	80%		100%

<b>Process Name:</b> Benefits/Insurance Administration		<b>Process Identifier:</b> BA	
<b>Sub-Process Name:</b> Benefit Vendor Maintenance		<b>Sub-Process Identifier:</b> BA-04	
<b>Law, Policy, or Statute Site That Govern Sub-Process:</b>			
<b>Law, Policy, or Statute</b>			<b>Change Required (Yes/No)?</b>
State Plan Document requires split contracts for spouses if both are “State Employees” (Central State, University of Tennessee, or Tennessee Board of Regents). This policy will need to be changed to allow one spouse to maintain family coverage, which treats the other spouse as a dependent. The eligibility rules would need to be changed allowing an eligible dependent child of either employee to be covered. This dependent child may or may not be living in the home, or may or may not be covered on the Head of Contract’s (HOC) Federal Income Tax, but must remain an eligible dependent of either employee. Both employees will be provided the State paid portion of Basic & AD&D Life Coverage, and will be available to elect any additional amounts up to the maximum according to their individual salary and/or age.			Yes
<b>Key Assumptions:</b> <ul style="list-style-type: none"><li>• Program identification codes (e.g., BC-HLTH-SNGL, PR-TERM-EMPL, DC-DNP2-MULT) will be converted from the current Tennessee Insurance System to the Edison System.</li><li>• No longer require split contracts when both a husband and wife are considered State employees as one can maintain family coverage and cover the other as a dependant. Both parties will be allowed to enroll in the basic life, accident and dismemberment insurance programs.</li><li>• Financial accounting codes for Third Party “Participants” (University of Tennessee, Tennessee Board of Regents, Local Education, Local Government and former employees (Retirees/COBRA)) will be converted from the current Tennessee Insurance System (TIS) to the Edison System.</li><li>• Scanning ability will be available for required documentation (e.g. Contracts with vendors, agencies and participants) will be provided.</li></ul>			



<b>Process Name:</b> Benefits/Insurance Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Benefit Vendor Maintenance	<b>Sub-Process Identifier:</b> BA-04
<b>Improvements:</b> <ul style="list-style-type: none"> <li>• Separating the age and salary data of basic life insurance tables from health programs will prevent excessive data entry when insurance vendors or premiums are changed.</li> <li>• All “Central State Employees” will have the basic amount of life insurance that is provided the State of Tennessee, eliminating the inequity that is currently caused by connection of the health and life programs. Currently only “Central State Employees” who elect health insurance coverage are actually provided the basic life insurance.</li> <li>• Source code will be key identifier for third party entities, budget code will be used as secondary (division/department) identifier.</li> <li>• Code tables will allow for selection of pre-defined values instead of keying individually.</li> <li>• Code table values will be effective dated.</li> <li>• Inquiry and update capability to pre-defined criteria code values.</li> </ul>	
<b>Change Management Concerns:</b> <ul style="list-style-type: none"> <li>• Separating the age and salary based basic life insurance tables from health programs will create an additional program for which employees must select.</li> <li>• Separating life tables will alleviate the need for split contracts when a husband and wife are both considered State employees.</li> <li>• Vendor acceptance of electronic signatures for beneficiary designation. Currently vendors must accept a copy of scanned Insurance Enrollment Change forms if an employee dies within 12 months of terminating employment.</li> <li>• Processing rules and procedures will need to be reviewed and possibly altered.</li> <li>• Organization of business units will need to be reviewed and possibly restructured.</li> <li>• Vendors will need to modify their processes to handle daily interfaces.</li> </ul>	<b>Communication Actions:</b> <ul style="list-style-type: none"> <li>• Training</li> <li>• Meetings with stakeholders</li> <li>• Meetings with Vendors</li> </ul>

<b>Process Name:</b> Benefits/Insurance Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Benefit Vendor Maintenance	<b>Sub-Process Identifier:</b> BA-04
<b>Eliminated Non-Core Systems:</b> <ul style="list-style-type: none"><li>• Excel spreadsheet for approved waiver of life insurance premiums due to permanent disability prior to age 65.</li><li>• Excel spreadsheet used for calculating Local Government Agencies premium levels.</li><li>• Excel spreadsheet of participants and dependents obtaining age 65.</li></ul>	

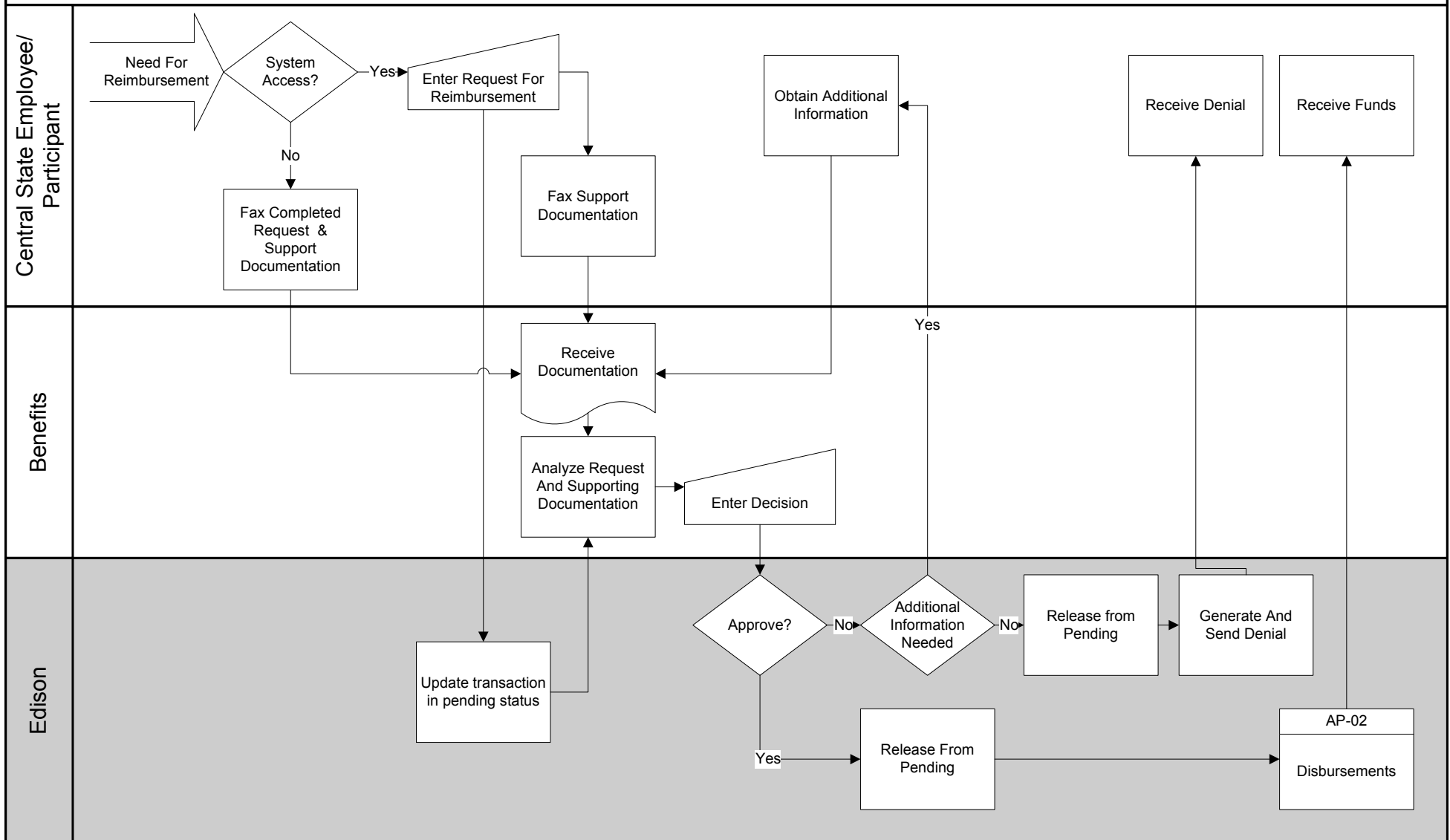


<b>Process Name:</b> Benefit/Insurance Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Benefit Notifications	<b>Sub-Process Identifier:</b> BA-05
<b>Sub-Process Purpose and Objectives:</b> The Benefit Notifications sub-process addresses the need for mandatory and informational notifications sent to “Central State Employees and “Participants” and/or eligible dependents utilizing an ERP Benefits/Insurance module.	
<b>Sub-Process Description:</b> Throughout the year, numerous notifications are sent to “Central State Employees”, “Participants”, dependents, and employers (Central State, UT, TBR, LE, and LG agencies). Notification will be sent via email and/or US Postal Service, as defined by the user, State or Federal Laws. Federal Law mandates that notifications be sent when an insurance participant becomes eligible or ineligible for medical or dental insurance benefits. The notifications and the events that are automatically generated will be predefined to Edison to comply with Federal COBRA or HIPAA Laws.  Notifications will be automatically generated to confirm a request for action, a change in eligibility status of a “Central State Employee”, “Participant” or covered dependent.  Edison will provide the ability for Benefits/Insurance Administration to create and distribute unique notifications on an as-needed basis. Notifications to inform individuals of special events such as Annual Enrollment/Transfer Periods, Employee Assistance Seminars, and Wellness Events, will be created and distributed to all individuals or a select group of individuals, using predefined department/agency/user group codes. Benefits/Insurance Administration will also have the ability to create unique notifications to an individual participant, dependent or beneficiaries.  All notifications will be maintained, accessible, viewable and printable within Edison. Notification history will be maintained in reverse chronological order, at the individual “Central State Employee”, “Participant” or dependent level and will include: addressee name, date and type of notification, method of delivery (email or US Postal Service) and delivery address. Informational notifications to all participants will also be maintained and retrievable.	

<b>Process Name:</b> Benefit/Insurance Administration		<b>Process Identifier:</b> BA	
<b>Sub-Process Name:</b> Benefit Notifications		<b>Sub-Process Identifier:</b> BA-05	
<b>Sub-Process Trigger(s):</b> <ul style="list-style-type: none"><li>Newly hired, or changes to “Central State Employees”, or “Participants” or dependents</li><li>Newly active or changes to existing Third Party Agencies</li><li>Upcoming Events or Changes</li><li>Failure to Pay</li><li>Previously Eligible “Central State Employees”, or “Participants” or dependents</li><li>Annual enrollment/transfer periods</li></ul>		<b>Key Sub-Process Participants:</b> <ul style="list-style-type: none"><li>“Central State Employees”, or “Participants”</li><li>Agencies (includes UT, TBR, LG, LE, TCRS, and OLA)</li><li>Vendor</li><li>Benefits/Insurance Administration</li></ul>	
<b>Inputs:</b>			
<b>Input</b>	<b>Format</b>	<b>Volume/Time</b>	<b>Suppliers</b>
Personnel Actions	Direct Online Entry	40,000 Annually	Edison
Agency/ESS Request	Direct Online Entry	260,000 Monthly	“Central State Employees”, or “Participants” or dependents UT, TBR, LG, LE, TCRS, and OLA
Notifications to beneficiaries	Direct Online Entry	30 Monthly	Benefits Administration, TCRS
Annual Enrollment Periods or Upcoming Events	Direct Online Entry		Benefit Administration, TCRS
<b>Outputs:</b>			
<b>Output</b>	<b>Format</b>	<b>Volume/Time</b>	<b>Recipients</b>
Personalized Notifications	Email, US Postal defined by user	260,000 monthly	“Central State Employees”, or “Participants” or dependents UT, TBR, LG, LE, TCRS, OLA, and Benefits Administration
Event Notification	Email, US Postal defined by user	1,500,000 annually	“Central State Employees”, or “Participants” or dependents UT, TBR, LG, LE, TCRS, OLA, and Benefits Administration

<b>Process Name:</b> Benefit/Insurance Administration		<b>Process Identifier:</b> BA	
<b>Sub-Process Name:</b> Benefit Notifications		<b>Sub-Process Identifier:</b> BA-05	
Update Transaction	Interface	260,000 monthly	Vendor
<b>Performance Measures Tracked:</b>			
<b>Measure</b>	<b>Current Value</b>		<b>Target Value</b>
Mandated notifications automatically generated and sent in compliance with predefined events and time periods.	95%		100%
As needed notifications created and sent according to user specifications.	100%		100%
Notifications are maintained in history, accessible and printable	95%		100%
<b>Law, Policy, or Statute Site That Govern Sub-Process:</b>			
<b>Law, Policy, or Statute</b>			<b>Change Required (Yes/No)?</b>
Federal COBRA Law			No
Federal Health Insurance Portability and Accountability Act			No
<b>Key Assumptions:</b>			
<ul style="list-style-type: none"> <li>• System provides the ability to create unique as-needed notifications.</li> <li>• "Central State Employees" and "Participants" have access to computers and acceptable email providers.</li> <li>• Ability to announce and allow enrollment for EAP Seminars and Wellness programs via web and link enrollment address.</li> <li>• Produce all reports electronically providing print capabilities.</li> </ul>			
<b>Improvements:</b>			
<ul style="list-style-type: none"> <li>• Notifications can be made through either email or US Postal Service.</li> <li>• Notification history at the participant level will provide ease of access to participants and Benefits Administration personnel.</li> <li>• Users with appropriate security will have the ability to create unique notifications to an individual, group of participants or all participants. Notification will be maintained within Edison.</li> <li>• Users with appropriate security will be able to establish, change or delete notification templates.</li> </ul>			

<b>Process Name:</b> Benefit/Insurance Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Benefit Notifications	<b>Sub-Process Identifier:</b> BA-05
<b>Change Management Concerns:</b> <ul style="list-style-type: none"><li>• Eligibility, enrollment and premium processing rules and procedures will need to be reviewed and possibly altered.</li><li>• Organization of business units will need to be reviewed and possibly restructured.</li></ul>	<b>Communication Actions:</b> <ul style="list-style-type: none"><li>• Training</li><li>• Meetings with stakeholders</li><li>• Meetings with Vendors</li></ul>
<b>Eliminated Non-Core Systems:</b> <ul style="list-style-type: none"><li>• Wellness Access database and Excel spreadsheets</li></ul>	





<b>Process Name:</b> Benefits/Insurance Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Flex Benefits Reimbursement	<b>Sub-Process Identifier:</b> BA-06
<b>Sub-Process Purpose and Objectives:</b> The Flex Benefits Reimbursement sub-process establishes and maintains “Central State Employees” Flexible Benefits Accounts activity and other pre-tax payroll deductions utilizing an ERP Benefits/Insurance module.	
<b>Sub-Process Description:</b> Flexible Benefits accounts will only be available to “Central State Employees”, and will be established and maintained within the Benefits Administration module by the employee using self-service functionality.	
<p>Utilizing Employee Self Service (ESS), employees will be allowed to establish medical, childcare, and transportation plan expenditure accounts when eligible, and update or change the accounts by scanning or faxing the required documentation. Deductions for Flexible Benefits Accounts will be taken within the Payroll module with balances showing on employee payroll remittance advice, as well as being available online via ESS.</p> <p>Request for reimbursement will be processed online. “Central State Employees” will select the type and amount of reimbursement, and fax the proof of purchase/receipts. The faxed copy will be scanned by Benefit Administration staff. Edison will issue an email or paper notification to confirm the request. The request will be suspended awaiting the approval of Benefits Administration. If the request is approved, Edison will again notify the “Central State Employees” and the request will be integrated with the Payroll module where balances will be automatically reduced. It will also be integrated with the Accounts Payable module where the payment will be issued. If the reimbursement request is denied, a notification will also be issued with an explanation.</p> <p>Additional notifications will be issued when the “Central State Employees” have a remaining balance at year-end, but should not be necessary throughout the year with the balances available for viewing online and on the payroll remittance advice.</p> <p>If a “Central State Employee” has elected pre-tax conversion of Medical or Dental insurance premiums and wishes to terminate the coverage, a “Family Status Change” form must be completed online and required proof of change faxed to Benefits Administration. The faxed copy will be scanned for record retention. The request will be suspended awaiting approval of Benefits Administration. If approved, the flex indicators will be changed allowing the employee to terminate insurance enrollment without penalties. If denied, the system will issue a notification to the employee advising of the penalties in continuing with the termination.</p> <p>Employees without (ESS) access can submit their request through the agency’s Benefits Coordinator, who will be responsible for entering the data and scanning the documentation or assisting the employee with the procedure.</p>	

<b>Process Name:</b> Benefits/Insurance Administration		<b>Process Identifier:</b> BA	
<b>Sub-Process Name:</b> Flex Benefits Reimbursement		<b>Sub-Process Identifier:</b> BA-06	
<b>Sub-Process Trigger(s):</b> <ul style="list-style-type: none"><li>• Newly eligible or changes to “Central State Employees”</li><li>• Request for reimbursement or termination</li><li>• Family Status Change Form</li><li>• Proof of change</li><li>• Receipt of purchase</li></ul>		<b>Key Sub-Process Participants:</b> <ul style="list-style-type: none"><li>• “Central State Employee”</li><li>• Central State Agency</li><li>• Benefits</li></ul>	
<b>Inputs:</b>			
<b>Input</b>	<b>Format</b>	<b>Volume/Time</b>	<b>Suppliers</b>
ESS/Agency Enrollment	Direct online entry	4,800 annually	“Central State Employee” Central State Agency, Benefits Administration
ESS/Agency Medical Reimbursements	Direct online entry	4,800 annually	“Central State Employee” Central State Agency, Benefits Administration
ESS/Agency Child Care Reimbursements	Direct online entry	4800 annually	“Central State Employee” Central State Agency, Benefits Administration
ESS/Agency Family Status Change	Direct online entry	4,800 annually	“Central State Employee” Central State Agency, Benefits Administration
Supporting Documentation	Interface Scanned Documents	4,800 annually	“Central State Employee” Central State Agency, Benefits Administration
<b>Outputs:</b>			
<b>Output</b>	<b>Format</b>	<b>Volume/Time</b>	<b>Recipients</b>
Confirmation Notification	Email, Paper Notification	14,400 annually	“Central State Employee” Central State Agency, Benefits Administration

<b>Process Name:</b> Benefits/Insurance Administration		<b>Process Identifier:</b> BA	
<b>Sub-Process Name:</b> Flex Benefits Reimbursement		<b>Sub-Process Identifier:</b> BA-06	
Pending Notifications	Email, Online	14,400 annually	"Central State Employee" Central State Agency, Benefits Administration
Approval/denial Notification	Email, Paper Notification	14,400 annually	"Central State Employee" Central State Agency, Benefits Administration
Update Transaction	Interface	14,400 annually	"Central State Employee" Central State Agency, Benefits Administration, Vendor
<b>Performance Measures Tracked:</b>			
<b>Measure</b>		<b>Current Value</b>	<b>Target Value</b>
Process reimbursement within 10 business day guarantee		100%	100%
<b>Law, Policy, or Statute Site That Govern Sub-Process:</b>			
<b>Law, Policy, or Statute</b>			<b>Change Required (Yes/No)?</b>
IRC Sections 457(b); 401(a); 401(k); 402; 415			No
IRC Section 125; 129; 132			No
T.C.A. 8-25-101 et seq			No
T.C.A. 8-25-301 et seq			No
T.C.A. 8-25-501 et seq			No
<b>Key Assumptions:</b>			
<ul style="list-style-type: none"> <li>Flexible Expenditure reimbursement will be processed inside the Accounts Payable module with balances indicated the employee's payroll remittance advice.</li> </ul>			
<b>Improvements:</b>			
<ul style="list-style-type: none"> <li>Automatically calculate maximum allowable exemptions per IRS guidelines.</li> <li>Ability to scan required documents will expedite processing.</li> <li>Ability to use debit cards for reimbursements.</li> <li>Additional benefit for Qualified Transportation Plan</li> </ul>			

<b>Process Name:</b> Benefits/Insurance Administration	<b>Process Identifier:</b> BA
<b>Sub-Process Name:</b> Flex Benefits Reimbursement	<b>Sub-Process Identifier:</b> BA-06
<b>Change Management Concerns:</b> <ul style="list-style-type: none"><li>• Cost of debit card use for medical and dental reimbursements.</li><li>• Employee proof of purchase audit with the use of debit cards.</li><li>• The addition of the Transportation Plan to the current TCA.</li><li>• Processing rules and procedures will need to be reviewed and possibly altered.</li><li>• Organization of business units will need to be reviewed and possibly restructured.</li></ul>	<b>Communication Actions:</b> <ul style="list-style-type: none"><li>• Meetings with key stakeholders</li><li>• Training Benefits Coordinators</li><li>• ESS Training</li></ul>
<b>Eliminated Non-Core Systems:</b> <ul style="list-style-type: none"><li>• Flex</li></ul>	